



City of Strafford

One and Two-Family Building Permit Application

Application Date: _____

Permit #: _____

Property Address: _____ Subdivision: _____ Lot: _____

Owner: _____ Address: _____

Phone Number: _____ Email Address: _____

General Contractor: _____ Address: _____

Phone Number _____ Email Address: _____

Electrical Contractor: _____ Address: _____

Phone Number _____ Email Address: _____

Plumbing Contractor: _____ Address: _____

Phone Number _____ Email Address: _____

Mechanical Contractor: _____ Address: _____

Phone Number _____ Email Address: _____

BUILDING INFORMATION

Two sets of plans including a site plan with driveway, setbacks and easements shown, a floor plan and an elevation plan must be submitted with your application. One approved set must always be on site.

NOTE: Engineered beams (LVL, etc.) and garage "bull truss" design documents shall be submitted for review and approval along with the plans.

If a duplex, patio home, zero lot line, or condo the UL fire separation wall detail must be submitted.

Description of work being done for an addition/ remodel: _____

Total cost of project: _____

Sq. ft. for: main floor: _____ Second floor: _____ Finished basement: _____

Unfinished basement: _____ Garage/ Carport: _____ Covered porch or patio: _____

Number of: Furnaces: _____ Water Heaters: _____ Gas appliances: _____ Electric Service Size: _____

Bathrooms: _____

State Grade, Size, Spacing and Span (Span stated shall be the greatest span needed for the design.)

Floor Framing: Girders: _____

Floor Joist: _____

Ceiling Joist: _____

Rafters: _____

I hereby certify that I am the owner or duly authorized agent. I hereby agree to pay any third-party fees associated with this project. I hereby verify that the answers and other information on this application is true and correct and I have read and understand the above procedures and requirements as they pertain to City Building Regulations and by signing this form acknowledge compliance with these rules.

AUTHORIZED AGENT OR OWNER SIGNATURE: _____ DATE: _____

PERMIT ISSUANCE APPROVAL BY: _____ DATE: _____